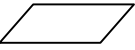


ORDER FOR CERTIFIED COPY OF DEATH CERTIFICATE
FOR ALL PERSONS WHO DIED IN SEATTLE CITY LIMITS (ALL YEARS)
OR IN KING COUNTY (1944 FORWARD) ONLY

VITAL STATISTICS

Public Health - Seattle & King County
KING CO. ADMIN. BLDG., RM. 214
500 - 4th Ave., Seattle, Washington 98104
(206) 296-4769

VA 

QUANTITY _____ copies @ \$17.00 each = \$ _____

MAKE CHECK PAYABLE TO VITAL STATISTICS

Full Name First Middle Last Age of Deceased:
of Deceased:

Place of Death
(City):

Date of Death
(or 10-year period to search):

Name of A/C No.
Funeral Home:

SIGNED: DATE:

RELATIONSHIP TO PERSON WHOSE CERTIFICATE IS REQUESTED?

Please Note: Any time a record is searched for and not found, an \$8.00 search fee is charged per the Revised Code of Washington (RCW 70.58.107).

DEATH

OFFICE USE ONLY

CK. MO. ☐ CASH ☐

AMT. RC'D \$ _____

INDEX NO. YR. REC.
SRCH. ☐

ISSUED DATE

Name and address of person requesting certified copy:

NAME

STREET AND NUMBER

CITY STATE ZIP CODE

TELEPHONE NO.

PLEASE PRINT